



STATE OF MISSOURI
GEOLOGICAL SURVEY PROGRAM

APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

RECEIVED

FORM OGC-3

MAY 14 2012

<input checked="" type="checkbox"/> APPLICATION TO DRILL		<input type="checkbox"/> DEEPEN		<input type="checkbox"/> PLUG BACK		<input checked="" type="checkbox"/> FOR AN OIL WELL		<input type="checkbox"/> OR GAS WELL																																																	
NAME OF COMPANY OR OPERATOR Altavista Energy, Inc.						DATE 05/14/2012																																																			
ADDRESS PO Box 128				CITY Wellsville		STATE KS		ZIP CODE 66092																																																	
DESCRIPTION OF WELL AND LEASE																																																									
NAME OF LEASE Mick Effertz				WELL NUMBER A-2		ELEVATION (GROUND) 1057																																																			
WELL LOCATION (GIVE FOOTAGE FROM SECTION LINES) 825 ft. from <input type="checkbox"/> North <input checked="" type="checkbox"/> South section line 495 ft. from <input checked="" type="checkbox"/> East <input type="checkbox"/> West section line																																																									
WELL LOCATION Sec. 32 Township 46 North Range 33 <input type="checkbox"/> East <input checked="" type="checkbox"/> West				LATITUDE 38.76184		LONGITUDE 94.59104		COUNTY Cass																																																	
NEAREST DISTANCE FROM PROPOSED LOCATION TO PROPERTY OR LEASE LINE 495 FEET ✓																																																									
DISTANCE FROM PROPOSED LOCATION TO NEAREST DRILLING, COMPLETED OR APPLIED - FOR WELL ON THE SAME LEASE 330 FEET																																																									
PROPOSED DEPTH 800		DRILLING CONTRACTOR, NAME AND ADDRESS Town Oilfield Services, PO Box 339, Louisburg, KS 66053				ROTARY OR CABLE TOOLS Rotary		APPROX. DATE WORK WILL START 05/21/2012																																																	
NUMBER OF ACRES IN LEASE 80		NUMBER OF WELLS ON LEASE INCLUDING THIS WELL, COMPLETED IN OR DRILLING TO THIS RESERVOIR 2																																																							
		NUMBER OF ABANDONED WELLS ON LEASE 0																																																							
IF LEASE PURCHASED WITH ONE OR MORE WELLS DRILLED, FROM WHOM PURCHASED? NAME N/A - New Lease ADDRESS						NO. OF WELLS PRODUCING 0 INJECTION 0 INACTIVE 0 ABANDONED 0																																																			
STATUS OF BOND		<input type="checkbox"/> SINGLE WELL AMOUNT \$		<input checked="" type="checkbox"/> BLANKET BOND OK AMOUNT \$ 40,000		<input checked="" type="checkbox"/> ON FILE <input type="checkbox"/> ATTACHED																																																			
REMARKS: (IF THIS IS AN APPLICATION TO DEEPEN OR PLUG BACK, BRIEFLY DESCRIBE WORK TO BE DONE, GIVING PRESENT PRODUCING/INJECTION ZONE AND EXPECTED NEW INJECTION ZONE; USE BACK OF FORM IF NEEDED)																																																									
<table border="1"><thead><tr><th colspan="4">PROPOSED CASING PROGRAM</th><th colspan="4">APPROVED CASING - TO BE FILLED IN BY STATE GEOLOGIST</th></tr><tr><th>AMOUNT</th><th>SIZE</th><th>WT/FT</th><th>CEMENT</th><th>AMOUNT</th><th>SIZE</th><th>WT/FT</th><th>CEMENT</th></tr></thead><tbody><tr><td>20' (surface)</td><td>8.625"</td><td>20</td><td>5 sx (to surf.)</td><td>20'</td><td>8.625</td><td>20</td><td>Full</td></tr><tr><td>800' (prod)</td><td>4.5"</td><td>10</td><td>130 sx (to surf)</td><td>800'</td><td>4.5</td><td>10</td><td>Length</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>										PROPOSED CASING PROGRAM				APPROVED CASING - TO BE FILLED IN BY STATE GEOLOGIST				AMOUNT	SIZE	WT/FT	CEMENT	AMOUNT	SIZE	WT/FT	CEMENT	20' (surface)	8.625"	20	5 sx (to surf.)	20'	8.625	20	Full	800' (prod)	4.5"	10	130 sx (to surf)	800'	4.5	10	Length																
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I, the Undersigned, state that I am the <u>Manager</u> of the <u>Corp.</u> (Company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.																																																									
SIGNATURE <i>Mick Effertz</i>						DATE 05/14/2012																																																			
PERMIT NUMBER 037-20939				<input checked="" type="checkbox"/> DRILLER'S LOG REQUIRED <input checked="" type="checkbox"/> E-LOGS REQUIRED IF RUN <input checked="" type="checkbox"/> CORE ANALYSIS REQUIRED IF RUN <input checked="" type="checkbox"/> DRILL SYSTEM TEST INFO REQUIRED IF RUN <input type="checkbox"/> SAMPLES REQUIRED <input checked="" type="checkbox"/> SAMPLES NOT REQUIRED <input type="checkbox"/> WATER SAMPLES REQUIRED AT																																																					
APPROVED DATE 5-30-12																																																									
APPROVED BY <i>Joseph A. [Signature]</i>																																																									
NOTE ▶ THIS PERMIT NOT TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER LOCATION.																																																									
APPROVAL OF THIS PERMIT BY THE OIL AND GAS COUNCIL DOES NOT CONSTITUTE ENDORSEMENT OF THE GEOLOGIC MERITS OF THE PROPOSED WELL NOR ENDORSEMENT OF THE QUALIFICATIONS OF THE PERMITTEE																																																									
I, _____ of the _____ (Company), confirm that an approved drilling permit has been obtained by the owner of this well. Council approval of this permit will be shown on this form by presence of a permit number and signature of authorized council representative.																																																									
DRILLER'S SIGNATURE						DATE																																																			

MO 780-0211 (3-11)

REMIT ONE (1) COPY TO: GEOLOGICAL SURVEY PROGRAM, PO BOX 250, ROLLA, MO 65402 573-368-2143.

Belton 38 45 42.62
- 94 35 27.74

OK/KR
5/21/12

STATE OF MISSOURI
MISSOURI DEPARTMENT OF NATURAL RESOURCES
GEOLOGICAL SURVEY PROGRAM
WELL LOCATION PLAT

FORM OGC-4

OWNER'S NAME Altavista Energy, Inc.																																																																																	
LEASE NAME Mick Effertz (Well A-2)	COUNTY Cass																																																																																
WELL LOCATION (GIVE FOOTAGE FROM SECTION LINES) 825 ft. from <input type="checkbox"/> North <input checked="" type="checkbox"/> South from section line 495 ft. from <input checked="" type="checkbox"/> East <input type="checkbox"/> West from section line																																																																																	
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<div><div><div>N ↑</div><div>2 1/2 acre requirement for Cass county.</div></div><table><tr><td>5280</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>4620</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>3960</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>3300</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>2640</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>1980</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>1320</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>660</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table><div>REMARKS Leased acreage is the S/2 SE/4, 80 acres m/l NEAREST LEASE LINE AND NEAREST SECTION LINE ARE THE SAME</div></div>		5280										4620										3960										3300										2640										1980										1320										660									
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<div><div>INSTRUCTIONS</div><div>On the above plat, show distance of the proposed well from the two nearest section lines, the nearest lease line, and from the nearest well on the same lease completed in or drilling to the same reservoir. Do not confuse survey lines with lease lines. See rule 10 CSR 50-2.030 for survey requirements. Lease lines must be marked.</div></div> <div><div>This is to certify that I have executed a survey to accurately locate oil and gas wells in accordance with 10 CSR 50-2.030 and that the results are correctly shown on the above plat.</div></div>																																																																																	
REMIT TWO (2) COPIES TO: GEOLOGICAL SURVEY PROGRAM PO BOX 250, ROLLA, MO 65402-0250 (573) 368-2143 ONE (1) COPY WILL BE RETURNED	REGISTERED LAND SURVEYOR NUMBER																																																																																